



PTO/SB/22 (12-04)

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TRANSMISSION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 <i>(Fees pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818).)</i>		Docket Number (Optional) 0380-P02819US0
Application Number: 10070,081		Filed: July 24, 2002
For: METHODS AND COMPOSITIONS RELATING TO BODY WEIGHT AND EATING DISORDERS		
Art Unit: 1646		Examiner: Nirmal Singh

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 120	\$60	\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 450	\$225	\$ _____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 510.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____

- Applicant claims small entity status. See 37 CFR 1.27.
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Director has already been authorized to charge fees in this application to a Deposit Account.
- The Director is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account Number 04-1406. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form.

Provide credit card information and authorization on PTO-2038.

I am the applicant/inventor.

- assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- attorney or agent of record. Registration Number 43,047
- attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34

Signature

Kathleen D. Rigaut, Ph.D., J.D.

Date

(215) 563-4100

Typed or printed name

Telephone Number

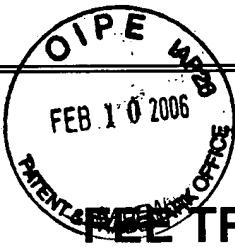
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 3 forms are submitted. (PTO/SB/21; PTO/SB/22; Fee Transmittal)

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

02/10/2006 FILED IN 00500069 10070081
510.00 OP
01 FC:2253



FEES TRANSMITTAL

Complete if known	
Application No. 10/070,081	
Filing Date: July 24, 2002	
First Named Inventor: Michael Cawthorne	
Group Art Unit: 1646	
Examiner Name: Nirmal Singh Basi	
Total Amt. of Payment: (1)+(2)+(3)=	\$510
Attorney Docket Number: 0380-P02819US0	

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																					
1. The Commissioner is hereby authorized to: <input type="checkbox"/> Charge indicated fees <input checked="" type="checkbox"/> Charge additional fees <input checked="" type="checkbox"/> Credit overpayments to the account of DANN, DORFMAN, HERRELL & SKILLMAN Deposit Account Number <u>04-1406</u>		ADDITIONAL FEES Fee Description Fee Paid Surcharge-late filing fee or oath _____ Surcharge - late provisional filing fee or cover sheet _____ Extension for response within <u>three</u> months _____ 510 Notice of Appeal _____ Filing a brief in support of an appeal _____ Request for oral hearing _____ Petition to revive unavoidably abandoned application _____ Petition to revive unintentionally abandoned application _____ Issue Fee _____ Petitions to the Commissioner _____ Petitions related to provisional applications _____ Submission of Information Disclosure Stmt. _____ Recording each patent assignment per property _____ Other fee (specify) _____																					
2. Payment enclosed: Check in the amount of <u>\$510</u> _____		FEE CALCULATION Fee Description Fee Utility filing fee _____ Design filing fee _____ Plant filing fee _____ Reissue filing fee _____ SUBTOTAL (1) _____																					
		SUBTOTAL (3) <u>\$510</u>																					
2. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Paid</th> <th style="text-align: center;">Extr</th> <th style="text-align: center;">Fee</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td style="text-align: center;">-</td> <td style="text-align: center;">= 0</td> <td style="text-align: center;">x = 0</td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: center;">-</td> <td style="text-align: center;">= 0</td> <td style="text-align: center;">x = 0</td> </tr> <tr> <td>Multiple Dependent (First presentation)</td> <td colspan="3" style="text-align: center;"> </td> </tr> <tr> <td></td> <td colspan="3" style="text-align: center;">SUBTOTAL (2) <u>\$0</u></td> </tr> </tbody> </table>					Paid	Extr	Fee	Total Claims	-	= 0	x = 0	Independent Claims	-	= 0	x = 0	Multiple Dependent (First presentation)					SUBTOTAL (2) <u>\$0</u>		
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Submitted By:

Typed or

Printed Name Kathleen D. Rigaut, Ph.D., J.D. Reg. Number 43,047 Deposit Account User ID

Signature Kathleen D. Rigaut Date February 6, 2006 04-1406